TOTAL CHARGEABLE CLAIMS	
TOTAL CLAIMS FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS MINUS 20:: 25 NULTIPLE DEPENDENT CLAIM PRESENT 'If the difference in column 1 is less than zero, enter '0' in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) Total AMENDMENT Total Independent CLAIMS REMAINING AMENDMENT AMENDMENT Total (Column 3) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 6) (Column 7) (Column 7) (Column 8) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 3) (Column 3) (Column 4) (Column 3) (Column 3) (Column 3) (Column 4) (Column 3) (Column 3) (Column 3) (Column 4) (Column 3) (Column 4) (Column 5) (Column 6) (Column 7) (Column 7) (Column 7) (Column 8) (Column 8) (Column 9) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 3) (Column 3) (Column 4) (Column 3) (Column 3) (Column 3) (Column 4) (Column 3) (Column 3) (Column 3) (Column 4) (Column 3) (Column 3) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 8) (Column 8) (Column 9) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 7) (Column 6) (Column 7) (Column 8) (Column 8) (Column 8) (Col	FEE
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* If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS AFTER PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PRESENT FEE Total	
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PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
* If the entry in column 1 is less than the entry in column 2, write "o" in column 3.	· · ·
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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I hereby certify that this correspondence is being filed by faxing same, addressed to the Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Attn: Examiner Backer, to facsimile number <u>703-872-9306</u> on the following date:

Myron Creenspan Name

Jeus

Signature dv 26, 2005

In re the U.S. Patent of

Barra et al.

Examiner: Firmin Backer

Serial No.: 09/771,546

Art Unit: 3621

Date Filed: January 29, 2001

Docket No.: P-1 CIP MG

For: Method and Apparatus for Providing a Service to Transfer Messages over a

Communications Network

Mailstop AF Commissioner of Patents, U.S. Patent Office P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL OFFICE ACTION AND REQUEST FOR RECONSIDERATION

SIR:

This is a response to the Final Rejection mailed March 30, 2005. The Examiner's comments in the Office Action have been carefully considered. Kindly amend the application as follows:

07/29/2005 DNASH1

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